

<i>SERFF Tracking Number:</i>	<i>BEAC-125244585</i>	<i>State:</i>	<i>Arkansas</i>
<i>First Filing Company:</i>	<i>The Employers' Fire Insurance Company, ...</i>	<i>State Tracking Number:</i>	<i>AR-PC-07-025740</i>
<i>Company Tracking Number:</i>	<i>2007-GL-AR-RU-474</i>		
<i>TOI:</i>	<i>17.0 Other Liability - Claims Made/Occurrence</i>	<i>Sub-TOI:</i>	<i>17.0001 Commercial General Liability</i>
<i>Product Name:</i>	<i>@vantage 4 -Tech PGL Rate Revision</i>		
<i>Project Name/Number:</i>	<i>@avantage 4 - Tech PGL Rate Revision/2007-GL-AR-RU-474</i>		

Filing at a Glance

Companies: The Employers' Fire Insurance Company, OneBeacon America Insurance Company

Product Name: @vantage 4 -Tech PGL Rate Revision
 SERFF Tr Num: BEAC-125244585 State: Arkansas

TOI: 17.0 Other Liability - Claims Made/Occurrence
 SERFF Status: Closed State Tr Num: AR-PC-07-025740

Sub-TOI: 17.0001 Commercial General Liability Co Tr Num: 2007-GL-AR-RU-474 State Status:

Filing Type: Rule Co Status: Reviewer(s): Betty Montesi, Edith Roberts, Brittany Yielding

Authors: Linda Jordan-Dow, Sharon Kennedy
 Disposition Date: 08/16/2007

Date Submitted: 08/08/2007 Disposition Status: Filed

Effective Date Requested (New): 09/01/2007 Effective Date (New):

Effective Date Requested (Renewal): 09/01/2007 Effective Date (Renewal):

General Information

Project Name: @avantage 4 - Tech PGL Rate Revision

Project Number: 2007-GL-AR-RU-474

Reference Organization:

Reference Title:

Filing Status Changed: 08/16/2007

State Status Changed: 08/08/2007

Corresponding Filing Tracking Number:

Filing Description:

Status of Filing in Domicile: Pending

Domicile Status Comments:

Reference Number:

Advisory Org. Circular:

Deemer Date:

We hereby submit for informational purposes revised general liability rules applicable to the Companies @vantage program for Technology accounts.. The Companies propose this filing be used for applicable new and renewal policies effective on or after September 1, 2007.

The purpose of the filing is to revise the Classifications applicable to the @vantage for Technology segment in the captioned companies through the addition, deletion and regrouping of certain classes.

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An Explanatory Memorandum, providing specific details relative to these changes, is herein enclosed. Additionally, a copy of the manual pages, reflecting the above changes, is enclosed for your review.

Company and Contact

Filing Contact Information

Sharon Kennedy, Compliance Analyst skennedy@onebeacon.com
 One Beacon Lane (781) 332-8190 [Phone]
 Canton, MA 02021-1030 (888) 209-7219[FAX]

Filing Company Information

The Employers' Fire Insurance Company	CoCode: 20648	State of Domicile: Massachusetts
One Beacon Lane	Group Code: 1129	Company Type:
Canton, MA 02021-1030	Group Name:	State ID Number:
(781) 332-7000 ext. [Phone]	FEIN Number: 04-1288420	

OneBeacon America Insurance Company	CoCode: 20621	State of Domicile: Massachusetts
One Beacon Lane	Group Code: 1129	Company Type:
Canton, MA 02021-1030	Group Name:	State ID Number:
(781) 332-7000 ext. [Phone]	FEIN Number: 04-2475442	

Filing Fees

Fee Required? No

Retaliatory? No

Fee Explanation:

Per Company: No

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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Filed	Edith Roberts	08/16/2007	08/16/2007

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Disposition

Disposition Date: 08/16/2007

Effective Date (New):

Effective Date (Renewal):

Status: Filed

Comment:

Rate data does NOT apply to filing.

Overall Rate Information for Multiple Company Filings

Overall Percentage Rate Indicated For This Filing	0.000%
Overall Percentage Rate Impact For This Filing	0.000%
Effect of Rate Filing-Written Premium Change For This Program	\$0
Effect of Rate Filing - Number of Policyholders Affected	0

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Item Type	Item Name	Item Status	Public Access
Rate	PGL Tech Rule 02	Approved	Yes
Rate	PGL Tech Rule 03	Approved	Yes
Rate	PGL Tech Rule 04	Approved	Yes

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Rate Information

Rate data does NOT apply to filing.

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Rate/Rule Schedule

Review Status:	Exhibit Name:	Rule # or Page #:	Rate Action	Previous State Filing Attachments Number:
Approved	PGL Tech Rule 02	@V4PGLTE02C Replacement W 07 07		@V4PGLTE02CW 07.07.pdf
Approved	PGL Tech Rule 03	@V4PGLTE03C Replacement W 07 07		@V4PGLTE03CW 07 07.pdf
Approved	PGL Tech Rule 04	@V4PGLTE04C Replacement W 07 07		@V4PGLTE04CW 07.07.pdf

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PROPRIETARY GENERAL LIABILITY SUPPLEMENT
INSURANCE FOR TECHNOLOGY RULE 02.

RATE GROUP 1	RATE GROUP 2	RATE GROUP 3
Calculating and Accounting Machines (except electronic computers)	Automatic Teller Machines	Automatic Controls
Cellular Telephone Carriers	Computer Integrated Systems Design	Printed Circuit Board Manufacturers
Communications Services NEC	Computer Maintenance and Repair	Relays and Industrial Controls
Communications Equipment	Computer Rental and Leasing	
Computer Peripheral Equipment (NEC)	Electrical Industrial Apparatus (NEC)	
Computer Programming Services – Consulting or Programming	Household audio and Video Equipment	
Computer Processing and Data Preparation and Processing Services	Information Retrieval Services	
Computer Software Mfg – Prepackaged Software Development	Instruments for Measuring and Testing of Electricity and Electrical Signals	
Computer Storage Devices	Industrial Instruments for Process Controls	
Computer Terminals Mfg / Assembly	Measuring and Control Devices (NEC)	
Electronic Connectors	Laboratory Analytical Instruments	
Electronic Components (NEC)	Scales and Balances, except Laboratory Equip.	
Electronic Capacitors		
Electronic Resistors		
Industrial Instruments for measurement & display		
Industrial Instruments for measurement manufacturing: instruments & laboratory equipment		
Information Technology Staffing Firms		
Office Machines - NEC		
Optical Instruments and Lenses		
Radio and TV Broadcasting Equipment		
Printed Circuit Board – Assembly Only		

@V4PGLTE02CW

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Satellite Telecommunications		
Search Detection & Navigation Equipment		
Semiconductors and Related Devices		
Telephones and Telegraph Apparatus		
Telephone Communications Services		

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PROPRIETARY GENERAL LIABILITY SUPPLEMENT
INSURANCE FOR TECHNOLOGY RULE 03.

CLASSIFICATION TABLE

41675	Computer Consulting or Programming
43151	Computer Data Processing – Operations
43152	Computer Data Processing – Time Sharing
47600	Internet Access Providers
47610	Internet Service Providers
51205	Alarm Mfg. – Burglar
51206	Alarm Mfg. – Fire or Smoke
51221	Appliances and Accessories Mfg. – Commercial – Not Gas
51926	Communication or recording, etc.: Industrial or Commercial
51927	Communication or recording systems or equipment mfg.
51941	Computer mfg.
51942	Computer Software Mfg. – Pre-packaged
52432 NOC	Electrical Equipment mfg.
52438 NOC	Electrical parts components or accessories mfg.
52440 NOC	Electrical power distribution or transmission equipment mfg.
52469	Electronic components mfg.
55647	Instrument mfg. – Analytical, calibrating, etc.
55648	Instrument mfg. - Control
55649 NOC	Instrument mfg.
57572	Office Machines Mfg.
57600	Optical Goods Mfg.
58663	Refrigeration Equipment Mfg.
59695	Telecommunications Equipment Mfg.
59701	Television Picture Tube Mfg.
91555	Computer Service or Repair
92451	Electrical Apparatus – Installation, Servicing or Repair
96930	Web Site Designers
99600	Telecommunications Service Providers
99614	Telegraph Companies

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PROPRIETARY GENERAL LIABILITY SUPPLEMENT
INSURANCE FOR TECHNOLOGY RULE 04.

RATING RULES

The rates and rules contained in this manual shall be used in conjunction with our Insurance for Technology Market Segment policies. The coverages to which these rates and rules apply are:

- Premises and Operations
- Products and Completed Operations

I. Premises/Operations and Products/Completed Operations

A. The following rules apply to

1. Premises and Operations Including Products Coverage
2. Premises and Operations Excluding Products Coverage
3. Premises and Operations Including Partial Products Coverage
4. Optional Coverages

B. Rules

1. Subline Code 334
2. Premium Basis. \$1,000 of Sales
3. Territory Code: Use applicable Subline 334 territory code for the state used to establish the location.
4. **Classification and Code Numbers**

Hazard Group 1 (Low Hazard) 54201

Hazard Group 2 (Moderate Hazard) 54202

Hazard Group 3 (High Hazard) 54203

5. Increased Limits Factors

The factors shown are combined for Premises! Operations and Products/Completed Operations Bodily Injury and Property Damage.

PREMISES/OPERATIONS AND PRODUCTS/COMPLETED OPERATIONS
BI&PD COMBINED

Aggregate	Each Occurrence			
	100	300	500	1,000
100	1.00			
300		1.38		
500			1.59	
1,000				2.40
2,000				2.44

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6. Experience Rating

- a. Calculate the account's three year General Liability loss ratio by using the General Liability earned premium for the term and the General Liability paid and incurred losses for the term. In computing the loss ratio, apply the appropriate maximum single loss (MSL) to any one loss (stop loss) according to the following table:

Premium	MSL
\$10,000 and under	\$10,000
\$10,001 to \$25,000	\$12,500
\$25,001 to \$50,000	\$17,500
\$50,001 to \$75,000	\$22,500
\$75,001 to \$100,000	\$27,500
\$100,001 and over	\$32,500

No loss adjustment expense should be included

- b. Multiply the loss ratio calculated in **a.** above by an Incurred But Not Reported (IBNR) factor of 1.10.
- c. Locate on the attached table the applicable experience modification factor based upon the account's one year at limits General Liability manual premium and the account's loss ratio as determined in **b.** above.
- d. Multiply the final General Liability rate by the experience modification factor determined in **c.** above.

7. Deductible – Premium modification for deductibles is not permitted.

II. Technology Premises/Operations Including Products Coverage

A. Basic Limits Rate

The rates shown below combine bodily injury and property damage at the following limits:

\$100,000 general aggregate

\$100,000 products aggregate

\$100,000 each occurrence for bodily injury and property damage

These rates apply cumulatively as they pertain to each level of sales shown.

Sales	Hazard Group 1	Hazard Group 2	Hazard Group 3
First \$10,000,000	.08 - 1.57	.12 - 2.33	.17 - 3.14
Next \$15,000,000	.07 - 1.31	.11 - 2.07	.15 - 2.80
Next \$25,000,000	.04 - 0.81	.08 - 1.54	.11 - 2.04
Next \$50,000,000	.03 - 0.48	.04 - 0.81	.06 - 1.06
Next \$150,000,000	.01 - 0.23	.03 - 0.50	.04 - 0.70
Over \$250,000,000	.01 - 0.12	.01 - 0.28	.03 - 0.52

B. Base Premium

The base premium is calculated by applying cumulatively the appropriate rates from **A.** above pertaining to each level of sales in thousands.

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C. Premium

Multiply the base premium by the increased limits factor for the limits shown in the Declarations.

III. Technology Premises/Operations Excluding Products Coverage

A. Base Premium

Rates apply cumulatively as they pertain to each level of sales shown. Compute the base premium by multiplying result by the total sales in thousands.

Sales	Hazard Group 1	Hazard Group 2	Hazard Group 3
First \$10,000,000	.050 - .50	.050 - .50	.050 - .50
Next \$15,000,000	.040 - .46	.040 - .46	.040 - .46
Next \$25,000,000	.035 - .40	.035 - .40	.035 - .40
Next \$50,000,000	.030 - .34	.030 - .34	.030 - .34
Next \$150,000,000	.020 - .28	.020 - .28	.020 - .28
Over \$250,000,000	.010 - .26	.010 - .26	.010 - .26

B. Premium

Multiply the base premium by the increased limits factor for the limits shown in the Declarations.

IV. Technology Premises and Operations Including Partial Products Coverage

- A.** When only part of the insured's products are covered (e.g., medical or aircraft products are excluded), the base premium is calculated as follows:

1. Premium Basis

Determine the "sales of products covered" and the "sales of products not covered." The result of subtracting the "sales of products covered" from the insured's total sales is the "sales of products not covered."

Example:

	Insured's Total Sales	\$50,000,000
-	Sales of Products Covered	<u>-\$10,000,000</u>
=	Sales of Products Not Covered	= \$40,000,000

2. Base Premium

The base premium is determined as follows:

a. Sales of Products Covered

Compute the base premium by applying cumulatively the adjusted rates under **II.A.** pertaining to each level of sales of products covered in thousands.

b. Sales of Products Not Covered

Compute the base premium by applying cumulatively the rates shown below as they pertain to each level of sales per thousand.

- c.** Add the result of **a.** to the result of **b.** to obtain the base premium.

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Sales	Hazard Group 1	Hazard Group 2	Hazard Group 3
First \$10,000,000	.050 - .50	.050 - .50	.050 - .50
Next \$15,000,000	.040 - .46	.040 - .46	.040 - .46
Next \$25,000,000	.035 - .40	.035 - .40	.035 - .40
Next \$50,000,000	.030 - .34	.030 - .34	.030 - .34
Next \$150,000,000	.020 - .28	.020 - .28	.020 - .28
Over \$250,000,000	.010 - .26	.010 - .26	.010 - .26

B. Pricing

Multiply the base premium by the increased limits factor for the limits shown in the Declarations.

V. Optional Coverages

1. Additional Insured – Vendors CG 20 15

- a.** Refer to Rule 16. ADDITIONAL INTERESTS as found in SECTION I GENERAL RULES section of Division Six - General Liability of the Commercial Lines Manual.
- b.** The additional charge is between 10% and 25% of the increased limits premium charged in paragraph **II.** or between 10% and 25% of the increased limits premium charged in paragraph **IV.A.2.a.** to the number of units of exposure under the premium base for sales to the named vendor.
- c.** If Endorsement VCG 207 @vantage for GL – Technology endorsement is attached, CG 20 15 may not be used.
- d.** There is no coverage available for Additional Insured – Vendors when products coverage is excluded.

2. Other Additional Insureds – Refer to Company

- a.** Refer to Rule 16. ADDITIONAL INTERESTS as found in SECTION I GENERAL RULES section of Division Six - General Liability of the Commercial Lines Manual.
- b.** The charge for this Additional Insured is \$40.00 per each designated location and per each additional insured.
- c.** This charge is subject to the increased limit factor for the limits shown in the Declarations.

3. Premises Medical Payments

Refer to Rule 23. MANUAL RATES as found in SECTION I GENERAL RULES section of Division Six - General Liability of the Commercial Lines Manual.

The insurance provided under this coverage part includes premises medical payments coverage at a limit of \$5,000.

- a.** The charge for a premises medical payments coverage limit of \$10,000 is \$25.00.
- b.** The charge for a premises medical payments coverage limit of \$25,000 is \$50.00.
- c.** Refer to company for premises medical payments coverage limits in excess of \$25,000.

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VI. Technology Experience Rating Factors

GL Premium	Loss Ratio				
	10% or Less	Over 10% but not Over 20%	Over 20% but not Over 30%	Over 30% but not Over 40%	Over 40%
Up to \$250	.80	.85	.90	.95	None
\$251 to 350	.79	.84	.89	.95	None
351 to 500	.77	.83	.88	.94	None
501 to 600	.74	.80	.87	.93	None
601 to 750	.71	.78	.85	.93	None
751 to 1,000	.69	.77	.84	.92	None
1,001 to 1,500	.67	.75	.83	.92	None
1,501 to 1,700	.65	.74	.82	.91	None
1,701 to 1,900	.63	.72	.81	.91	None
1,901 to 2,200	.61	.71	.80	.90	None
2,201 to 2,500	.60	.70	.80	.90	None
2,501 to 2,800	.59	.69	.79	.89	None
2,801 to 3,200	.58	.68	.79	.89	None
3,201 to 3,700	.57	.68	.78	.89	None
3,701 to 4,300	.56	.67	.78	.89	None
4,301 to 5,000	.55	.66	.77	.89	None
5,001 to 5,800	.54	.65	.77	.88	None
5,801 to 6,700	.53	.65	.76	.88	None
6,701 to 8,000	.52	.64	.76	.88	None
8,001 to 9,999	.51	.63	.75	.88	None
10,000 and over	.50	.62	.75	.87	None